

FORCES AND TRENDS IN PUBLIC HEALTH FOR LIVINGSTON COUNTY

A. Purpose

The purpose of this phase of the MAPP process was to identify forces and trends that pose potential threats or opportunities for public health in Livingston County. The broader environment is constantly affecting communities and local public health systems. This environmental scan represents a critical phase of the larger analysis as it brings to light some of the parameters under which the current public health system operates. In one sense, the forces and trends represent the current “givens” of public health in Livingston County, and if not considered, they might render action in the other three areas of the MAPP analysis futile.

B. Approach

The Partnership engaged Harris Interactive to facilitate a brain storming session of key, critical leaders in the Livingston County public health system. These key leaders represented local government, local hospitals, health insurers, health and human service providers, local medical society, local business community and area colleges.

The key leaders met for a day long session on April 26, 2002 whereby they identified 67 forces and trends. The Facilitator then consolidated the input onto a worksheet on which the forces and trends were grouped under several larger categories. The members deliberated for the remainder

of the day on the revised groupings, offering additions in some areas, identifying threats and opportunities of these issues.

A second meeting was held on June 17, 2002 to review and validate the identified forces and trends. Staff had consolidated the issues onto a single graphic context map of the issues that were considered significant to the overall public health system.

C. Findings

The GVHP identified seven categories of forces and trends that are currently or could potentially impact the local public health system. While some of these trends may pose threats to public health, others may create opportunities that would strengthen the system.

- *Societal Changes- changing demographics, aging population, increasing diversity of cultures and out migration of youth.*
- *Economic Climate- loss of manufacturing jobs, disappearance of middle class.*
- *Political Climate-regulatory reform, increasing unfunded mandates*
- *Health Care Issues- impact of 9/11 funds available for public health, health insurance issues, lack of dental services for low income households*
- *Technology Changes- lack of infrastructure in rural/ remote areas to increase telemedicine capacity, costs of staying current*
- *Environment Issues- threats of bioterrorism and emergency preparedness, impact of economic development on environment.*
- *Educational System Issues- increase in youth violence in schools, lack of health care workforce, increase focus on technology fields, less on service industry*

The following chart details the identified threats and opportunities that were identified for each of the key forces of change.

TOPIC	CHALLENGES	OPPORTUNITIES
<p>SOCIETAL</p> <p>MIGRATION OUT OF LIVINGSTON COUNTY</p>	<p>Younger Work Force Leaving</p> <p>Increase in Percentage of Older Population</p> <p>Seek Health Services Elsewhere Lessening Volunteer Pool Age Groups</p>	<ul style="list-style-type: none"> • Market Work Force Opportunities • Market “Proud Community”, Small Town Feel, Family Values • ID Workforce Opportunities: Well paid, Mt. Morris, Dansville • College Student populations
<p>SOCIETAL</p> <p>INCREASE IN MINORITY</p>	<p>Language Barriers</p> <p>Cultural Issues</p> <p>Stigma</p> <p>Perception of Community</p> <p>Social Integration / Inclusion</p> <p>No Jail beds in Livingston County for women.</p> <p>Increase of Minority (Asian, Hispanic)</p> <p>Retention of “Front-Line” Staff</p>	<ul style="list-style-type: none"> • Diversity Information • Cultural Competencies • Redesign Materials • Increase Outreach Efforts • Define Outreach delivery system • ID Barriers: • Enhance community by hiring more bilingual social workers • Look specifically at location • Create an incentive for cultural community learning

TOPIC	CHALLENGES	OPPORTUNITIES
<p>SOCIETAL</p> <p>SENSE OF COMMUNITY</p>	<p>“Small town feel” can be somewhat reactive versus proactive</p> <p>Balance of rural living versus access to cultural/social/services. Maintain pristine environment versus “activities</p> <p>Preservation of Quality of Life</p>	<ul style="list-style-type: none"> • Look for leaders; create new leadership • Establish and maintain informal groups • Promote Community Buy-in • Community Assessment and Planning • Kids and Community
<p>SOCIETAL</p> <p>CHANGING FACE OF AGING</p>	<p>Most frail elderly, sicker older folks</p> <p>80+ Increases rapidly will stress our systems capacity</p> <p>Will affect all services</p> <p>Disappearance of Middle Class</p> <p>Decrease in Informal Supports due to Aging / Working families</p> <p>Workforce Issues in healthcare shortage</p> <p>Cultural Changes Impact on health, dental & reimbursement</p> <p>Healthcare Payor Demands</p>	<ul style="list-style-type: none"> • Expansion of LT Care Services • 50+ Looking at 2nd Careers

TOPIC	CHALLENGES	OPPORTUNITIES
<p>ECONOMIC CLIMATE</p> <p>WELFARE REFORM</p>	<p>Single Head of Household in Work in low paying jobs.</p> <p>Has not reduced Medicaid cost</p> <p>Low pay jobs</p> <p>Children’s expectations to work</p> <p>Resources</p> <p>Welfare Reform -</p>	<ul style="list-style-type: none"> • Educated Work Force • Maintain create – skill development apprenticeships • Involvement in TANEF reauthorization • Funnel money to fund other services
<p>ECONOMIC CLIMATE</p> <p>NEEMPLOYMENT AND WORKFORCE INFLUENCES</p>	<p>Loss of medical insurance (need for immediate coverage)</p> <p>Do we have services and resources</p> <p>Unemployed Seniors</p> <p>Out migration of younger population to find employment opportunities</p> <p>Welfare Reform - Female heads of household returning to work in low changes</p> <p>Specialty Docs</p> <p>Retention of “Front-Line” Staff</p>	<ul style="list-style-type: none"> • Educate people about medical insurance • Employers / WF dev. Program – HR & Enrollment awareness • Redesign and revisit current programs/resources • Re-entry programs • Planning as new industry comes

TOPIC	CHALLENGES	OPPORTUNITIES
ENVIROMENTAL BIOTERRORISM	Major Threat Surveillance – are we able to anticipate threats of bioterrorism? Money, Resources and Security	<ul style="list-style-type: none"> • Infrastructure of D. H. System will be in place; response by community prepared • More collaboration • Maintain safe drinking water • Look for funding for community opportunities • Awareness of • Emergency supplies – the time is right • Volunteerism, awareness, resources
POLITICAL CLIMATE STATE OF NY MANDATES	Unfunded mandates Late Budgets 9/11 Shift of Funds	<ul style="list-style-type: none"> • Education • Get dialogue going
POLITICAL CLIMATE REGULATORY REFORMS	Unfunded Federal and State Mandates- “Lack of Comprehension in Albany of Local Impact”	<ul style="list-style-type: none"> • Public Awareness- Advocacy w/ policy makers • Partnering to meet mandates with less resources.
HEALTH CARE MALPRACTICE RATES	In healthcare costs	<ul style="list-style-type: none"> • Public Awareness
HEALTH CARE ACCESS TO SPECIALTIES	Lack of specialties	<ul style="list-style-type: none"> • Telemedicine Structure (See Health)

TOPIC	CHALLENGES	OPPORTUNITIES
HEALTH CARE INSURANCE CONCERNS	Premiums Affordability	<ul style="list-style-type: none"> • Maintain Community Rating • Individuals to assess levels of benefits • Education about being responsible for their healthcare • Provide incentive for employer contributions • Keep discussing long term solutions • National Levels
HEALTH CARE LACK OF DENTAL SERVICES FOR Low Income POPULATION	<ul style="list-style-type: none"> • “Prejudicial attitudes of dental re: L1 population • “Nimby” 	<ul style="list-style-type: none"> • In-school clinics? • Reimbursement issues • CHALLENGES in emergency services and environmental services
HEALTH CARE HEALTH – ALL SERVICES MENTAL HEALTH	Need more community based access to specialties	<ul style="list-style-type: none"> • Early identification • Look at how the system as a whole is organized • Collaboration • Maintain current responsiveness

TOPIC	CHALLENGES	OPPORTUNITIES
<p>HEALTH CARE</p> <p>PHARMACOLOGICAL / TREATMENT ADVANCES (ALZHEIMER, STROKE RECOVERY)</p>	<p>Malpractice rates for specialty Doctors</p> <p>Regulatory Reforms – Deregulation of services that “pick the pocket” of traditional services, reimbursement issues</p> <p>Decrease hospital days - increasing community services (NOYES LOS 3.7)</p> <p>Litigating Society</p> <p>Lack of time to plan aftercare services</p> <p>Social / health CHALLENGES</p>	

TOPIC	CHALLENGES	OPPORTUNITIES
<p>EDUCATION</p> <p>Lack of Enrollment Healthcare careers</p>	<p>Loss of current and future resources Education – less emphasis / encouragement to services jobs; move towards technology</p> <p>Math and Science Test Scores indicate barrier to healthcare careers</p> <p>Kids Day Treatment program Closure in BOCES</p> <p>State Ed. Regulations prohibited / perception of barrier to partnering</p> <p>Economic Factors – State Aid / State Budget Crisis in Education (decrease in funding / opportunities, scholarships.</p>	<ul style="list-style-type: none"> • Funding • Internships (BOCES) • Area Health Education Center • Influence and impact healthcare work force into rural, health services. • Grants and funding • Promote healthcare education i.e. SUNY • Reinforce current efforts and partnerships • Collaborate and form efforts with other groups to increase visibility • Outreach to Nursing Schools for recruitment/ placement into Livingston County. • Work with current work force to reinforce healthcare options • Increase partnering of community services in schools
<p>EDUCATION</p> <p>MAINSTREAMING IN PUBLIC SCHOOLS</p>	<p>BOCES</p> <p>Diversity</p> <p>Resources, diluted services</p>	<ul style="list-style-type: none"> • BOCES can branch out into new programs • Advocacy • Education of kids • Partnering • Seek funding and reorganize/restructure
<p>EDUCATION</p> <p>RISK BEHAVIORS</p>	<p>Prevalence of drugs, AIDS, violence, family issues</p> <p>Some unhealthy lifestyles, alcoholism, drug abuse.</p>	<ul style="list-style-type: none"> • Educating Community of the Issues • Redesign services • Mobilization of Community

TOPIC	CHALLENGES	OPPORTUNITIES
TECHNOLOGY COSTS	<p>Increase Specialization of Tests</p> <p>Risk of losing Community rating of Health Insurance</p> <p>If something big happens in Rochester, it will impact L.C.</p> <p>Payors - ??’s they are making??</p> <p>Public expectation i.e. We have the technology</p> <p>Communication Technology to link remote/rural services to central Transportation</p> <p>“Leap Frog” Committee</p>	<ul style="list-style-type: none"> • Regional thinking to control costs • Mobile units • L.C. has improved / strengthened internally to handle these impacts. • Increase rates of employers and subscribers • Regional / Rural Consideration • Public Transportation • Teleconferencing • www.leapfroggroup.org